

# Montana Medicaid Claim Jumper

## Attention: Local Codes No Longer Available After December 31, 2003

HIPAA regulations do not allow the use of local codes after December 31, 2003. Local codes are used only for Montana Medicaid and are not listed in CPT/HCPCS reference books. HIPAA stipulates that all providers must use standardized code sets after this date. Standardized codes can be found in the most current editions of the CPT/HCPCS code reference books. For more information about local codes that are no longer to be used and new codes that should be used, please visit the Provider Information website at [www.mtmedicaid.org](http://www.mtmedicaid.org) and check the notices for your provider type.

**Transportation Providers** can no longer use local "Z" codes. Please see the new Transportation Provider notice for "Z" code replacements.

**Private Duty Nursing Providers** can no longer use local "Z" codes. Please see the new Private Duty Nursing Provider notice for "Z" code replacements.

**Eyeglass Providers** must use dispense codes 92340, 92341, and 92342 with a -52 modifier when dispensing a frame only or lens(es) only. Codes Z9553, Z9554, Z9555, Z9556, Z9557, Z9558, and Z9559 will no longer be allowed. Another code that cannot be used after December 31, 2003 is Z9613, handling fee, Walman warranty only. Z9613 will be replaced with code 99002 and will be reimbursed as a bundled fee.

### Nurse First Advice Line And Disease Management Now Available

For more information, see the November & December *Claim Jumpers* or contact Tedd Weldon at 406-444-1518.



## Attention: ACE\$ Submitters

Providers and billers who are still using ACE\$ to submit their claims electronically must enroll with ACS EDI Gateway, Inc. and begin submitting claims via WINASAP2003 immediately. Under HIPAA, ACS will not be able to process ACE\$ electronic transactions after December 31, 2003.

The WINASAP2003 software is free and can be downloaded at [www.acs-gcro.com](http://www.acs-gcro.com). Enrollment forms and instructions are available for download at the ACS EDI Gateway Inc. website at [www.acs-gcro.com](http://www.acs-gcro.com). For further information, please call the ACS EDI Gateway, Inc. Support Unit at (800) 987-6719. See page three of this newsletter for upcoming WINASAP2003 training opportunities in your area.

Moreover, ACS will no longer be able to accept and process any non-HIPAA-compliant NSF electronic claim transactions after March 31, 2004. All electronic claims must be submitted in the HIPAA-compliant ANSI ASC X12N format by this date, or preferably well in advance of the cut-off date.

Providers who submit electronic claims directly to ACS or those who use a clearinghouse to submit claims should contact ACS EDI Gateway, Inc. at (800) 987-6719 or their clearinghouse for more information about transitioning to the X12N format.

## WINASAP2003 Notes

Version 4.01 is currently available for download at [www.acs-gcro.com](http://www.acs-gcro.com). Providers should back up their databases, install the new version, and then restore the databases.

For professional claims, the Claim Frequency Code should be set to "1-Original." Claims not set to this code will reject upon submission.

Providers billing a procedure code requiring a code modifier should ensure that the modifier (for example "UA") is entered in the field to the right of the five-digit alphanumeric HCPCS procedure code.

## Holidays Impact Timing Of EFT Payments

Following the week of Christmas and the week of New Years' Day, payment to providers who are reimbursed through direct deposit will be delayed one day. Payments that are ordinarily direct-deposited on Monday will be direct-deposited on Tuesday.

## HIPAA Provider Fact Sheet Updated

All providers are advised to check out the recently revised version of the "HIPAA Provider Fact Sheet" available on the Provider Information website at [www.medicaid.org](http://www.medicaid.org). The new fact sheet has the latest information on HIPAA-related accomplishments and developments in Montana.

## Reminder for Pharmacy And Dental Providers: Cost Avoidance Waiver

As reported in the last issue of the *Claim Jumper*, on January 1, 2004, the Department will no longer allow pharmacy and dental providers to submit claims to Medicaid before submitting the claim to a client's other insurance, if applicable. The cost avoidance waiver, which allowed the Department to "pay and chase" claims for clients with other health insurance expires on December 31, 2003.

## DME, Dental/Denturist, Home & Community Based Providers

Claims for DME, dental, denturist, and home and community based services that exceed prior authorized limits will no longer result in the entire claim denying. Claims will pay for the dollar amount or units approved, allowing providers to be paid for a portion of the billed amount or units on the claim equal to the dollar amount or units remaining on the prior authorization record.

## Avoid Unnecessary Attachments

Providers submitting claims with Medicaid as a secondary or tertiary payer can record payments by other payers on a paper claim or in the appropriate field in an electronic claim submission. Hard copy attachments are only required if the other insurer denies payment (e.g., non-covered services, benefits exhausted) or the other insurer's payment went toward the deductible. Claims submitted electronically or on paper without unnecessary attached documents can be processed more efficiently.

## Procedure For Reviewing Emergency Department Claims

Hospitals, physicians, and mid-level practitioners may be interested in referencing the procedure for reviewing emergency department claims. This document was posted on the Provider Information website [www.mtmedicaid.org](http://www.mtmedicaid.org) on December 8, 2003.

## Nursing Facility Ancillary Billing Changes

The Department will be converting the current nursing facility ancillary billing codes to new HIPAA compliant HCPCS codes. These new codes will be available in January 2004 for billing on the CMS 1500 to Medicaid. While the codes and the definitions are being updated to reflect current billing practices, the same items and services will continue to be separately billable to Medicaid by nursing facility providers at direct acquisition cost with no mark up. These new HCPCS codes will be posted on the Provider Information website ([www.mtmedicaid.org](http://www.mtmedicaid.org)) when they are available. The current ancillary local codes will be available for billing purposes through the end of February 2004. The Senior and Long Term Care Division is in the process of updating the nursing facility provider manual and will mail this information to all nursing facility providers when completed.

## 2004 Spring Medicaid Provider Fair

The 2004 Spring Medicaid Provider Fair will be held at the Great Northern Hotel in Helena on April 27 & 28, 2004. Further details and registration information will be published in the March issue of the *Claim Jumper* and will be posted at [www.mtmedicaid.org](http://www.mtmedicaid.org).

## Recent Publications

The following are brief summaries of publications regarding recent program policy changes. For details and further instructions, download the complete notice from the Provider Information website (<http://www.mtmedicaid.org>). Select *Resources by Provider Type*, for a list of resources specific to your provider type. If you cannot access this information, contact provider relations.

### *New* Notices

**01/04/04 Private Duty Nursing**

Z Code Notice

**01/04/04 Transportation Providers**

Z Code Notice

**12/12/03 Outpatient Hospitals**

APC Grouper Update

**12/08/03 Hospitals, Physicians, Mid-levels**

Emergency Department Review Procedures

**12/01/03 Physicians, Mid-levels, Public Health Clinics, Podiatrists, Lab & X-ray, IDTFs**

Bilateral x-ray reimbursement

**12/01/03 Physicians, Mid-levels, Public Health Clinics, Hospitals, IHS Providers**

VFC changes

**12/01/03 Physicians, Mid-levels, Public Health Clinics, Lab & X-ray, Hospitals, IHS Providers**

Local Codes

**12/01/03 Hospitals, Physicians, Mid-levels, Public Health Clinics, Ambulatory Surgical Centers**

Botox injections

**12/01/03 Physicians, Targeted Case Management, Public Health Clinics, Psychiatrists**

High Risk Pregnant Women changes

**11/25/03 Pharmacy, Physicians, Mid-levels**

PA changes

**11/03 School-based Providers**

CSCT Powerpoint presentation

### WINASAP2003 Training

ACS will be conducting one-on-one and small group WINASAP2003 training sessions in January. The free WINASAP2003 software is replacing the ACE\$ electronic Medicaid claim submission software (See article on page one.) Providers who are currently submitting their claims on paper are also encouraged to take advantage of this convenient, free service to submit claims electronically.

Providers interested in WINASAP2003 training must call Michael Mahoney at 406-457-9532 or Maria Rogne at 406-457-9531 to schedule an appointment. Space is limited so schedule an appointment early.

- ❑ **January 13, 2004**, 8 a.m. – 5 p.m. (*1.5 hour sessions, appointment required*)  
U of M College of Technology, 909 South Ave. West, Rm. A013, Missoula, MT
- ❑ **January 15, 2004**, 8 a.m. – 5 p.m. (*1.5 hour sessions, appointment required*)  
DPHHS Computer Training Center, Airport Rd., Building 43, Helena, MT
- ❑ **January 21, 2004**, 8 a.m. – 5 p.m. (*1.5 hour sessions, appointment required*)  
Easter Seals/Goodwill Career Development Center, 815 2<sup>nd</sup> St. S., Great Falls, MT
- ❑ **January 28, 2004**, 8 a.m. – 5 p.m. (*1.5 hour sessions, appointment required*)  
Miles Community College, 2715 Dickinson, Miles City, MT

**Montana Medicaid  
ACS  
P.O. Box 8000  
Helena, MT 59604**

PRSRT STD  
U.S. Postage  
**PAID**  
Helena, MT  
Permit No. 154

## Key Contacts

**Provider Information Website:** <http://www.mtmedicaid.org>

**ACS EDI Gateway Website:** [http://www.acs-gcro.com/Medicaid\\_Accounts/Montana/montana.htm](http://www.acs-gcro.com/Medicaid_Accounts/Montana/montana.htm)

**ACS EDI Help Desk** (800) 987-6719

**Provider Relations** (800) 624-3958 Montana  
(406) 442-1837 Helena and out-of-state  
(406) 442-4402 fax

**TPL** (800) 624-3958 Montana  
(406) 443-1365 Helena and out-of-state

**Direct Deposit Arrangements** (406) 444-5283

**Verify Client Eligibility:**

**FAXBACK** (800) 714-0075

**Automated Voice Response (AVR)** (800) 714-0060

**Point-of-sale Help Desk for Pharmacy Claims** (800) 365-4944

**PASSPORT** (800) 624-3958

**Prior Authorization:**

**DMEOPS** (406) 444-0190

**Mountain-Pacific Quality Health Foundation** (800) 262-1545

**First Health** (800) 770-3084

**Transportation** (800) 292-7114

**Prescriptions** (800) 395-7961

**Provider Relations  
P.O. Box 4936  
Helena, MT 59604**

**Claims Processing  
P.O. Box 8000  
Helena, MT 59604**

**Third Party Liability (TPL)  
P.O. Box 5838  
Helena, MT 59604**